10/530219 JC06 Rec'd PCT/PTO 31 MAR 2009

Application Data Sheet

Application Information

Application number:

Not yet assigned

Filing Date:

Herewith

Application Type:

Regular

Subject Matter:

Utility

Suggested Classification:

Suggested Group Art Unit:

CD-ROM or CD-R:

None

Number of CD Disks:

Number of copies of CDs:

Sequence Submission?

Computer Readable Form (CRF)?

Number of Copies of CFR:

Title:

METHOD AND SYSTEM FOR CREATING A

PRODUCT PARTS CATALOG

Attorney Docket Number:

OMOR-0010

Request for Early Publication:

No

.

No

Request for Non-Publication: Suggested Drawing Figure:

1

Total Drawing Sheets:

31

Small Entity?:

Yes

Latin name:

Variety denomination name:

Petition included?:

No

Petition Type:

Licensed US Govt. Agency:

Contract or Grant Numbers:

Secrecy Order in Parent Appl.?:

Applicant Information

Applicant Authority Type: Inventor

Primary Citizenship Country: JAPAN

Status: Full Capacity

Given Name: Tomohiro

Middle Name:

Family Name: YAMADA

Name Suffix:

City of Residence: Tokyo

State or Province of Residence:

Country of Residence: Japan

Street of mailing address: c/o LATTICE TECHNOLOGY, INC.

City of mailing address: 4F Hiei-kudan Bldg.; 3-8-11, Kudan-minam

State or Province of mailing address: Chiyoda-ku, Tokyo

Country of mailing address: Japan

Postal or Zip Code of mailing address: 102-0074

Applicant Authority Type: Inventor

Primary Citizenship Country: Japan

Status: Full Capacity

Given Name: Koji

Middle Name:

Family Name: TANAKA

Name Suffix:
City of Residence: Tokyo

City of Residence: Tokyo
State or Province of Residence:

Country of Residence: Japan

Street of mailing address: c/o LATTICE TECHNOLOGY, INC.,

City of mailing address: 4F Hiel-kudan Bldg.; 3-8-11, Kudan-minam

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Full Capacity

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Tomohiro

Middle Name:

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HARADA

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State or Province of mailing address:

Chiyoda-ku, Tokyo

Country of mailing address:

Japan

Postal or Zip Code of mailing address:

102-0074

Correspondence Information

Correspondence Customer No.:

23377

Name:

Street of Mailing Address:

City of Mailing Address:

State or Province of Mailing Address:

Country of Mailing Address:

Postal or Zip Code of Mailing

Address:

Phone number:

Fax number:

Representative Information

Representative Customer No.:

23377

Domestic Priority Information

Application:

Continuity Type:

Parent Application:

Parent Filing Date:

Foreign Priority Information

Country:

Application No.:

Filing Date:

Priority Claimed:

Japan

2003-158541

June 3, 2003

Yes

Assignee Information

Assignee name:

Street of mailing address:

City of mailing address:

State or Province of mailing address:

Country of mailing address:

Postal or Zip Code of mailing address:

Assignee name:

Street of mailing address:

City of mailing address:

State or Province of mailing address:

Country of mailing address:

Postal or Zip Code of mailing address: